

AMGEN INC.

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MAY 31 2001

TELECENTER 1600/2900

DATE: **December 8, 2000**

TO: **Customer Corrections**
Facsimile: (703) 308-7751
Phone: (703) 308-1202

FROM: **Lynne Buchsbaum**
Phone: (805) 447-1086

There are a total of 2 pages being transmitted including this cover sheet. If all of the pages are not received, please contact us. Thank you.

Customer Corrections,

Attached is a copy of the Filing Receipt we received from the USPTO for serial no. 09/687,993. The Continuing Data as Claimed By Applicant is missing the priority application number. In addition, Attorney for Applicant's correspondence address contains several typographical errors. I have circled the incorrect information and indicated the information that needs to be added.

Please send us a "Corrected Filing Receipt" as soon as possible.

Thank you in advance for making this correction.

Lynne Buchsbaum
Patent Operations Dept.

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/687,993,✓	10/13/2000 ✓	1647	980	A-357C	9	11	1

U.S. Patent Operations DRC
 Dept. 4300 / MS 27-4-A
 AMGEN INC. Amgen Center
 1840 Detleville Drive One Amgen Center Drive
 Thousand Oaks, CA 91320-1799

FILING RECEIPT

0000000005591335

Date Mailed: 12/01/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

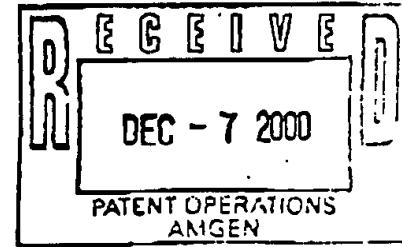
Shaw-Fen Sylvia Hu, Thousand Oaks, CA: ✓

Continuing Data as Claimed by Applicant

DIV OF 08/535,681 09/28/95

Foreign Applications

If Required, Foreign Filing License Granted 12/01/2000



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MAY 3 1 2001

TECH CENTER 1600/2900

Title

Truncated glial cell line-derived neurotrophic factor

Preliminary Class

514

Data entry by : MARTIN, DIANE

Team : OIPE

Date: 12/01/2000



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CONFIRMATION NO. 2749

Bib Data Sheet

SERIAL NUMBER 09/687,993	FILING DATE 10/13/2000 RULE	CLASS 514	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. A-357C
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APPLICANTS

Shaw-Fen Sylvia Hu, Thousand Oaks, CA;

** CONTINUING DATA *****

THIS APPLICATION IS A DIV OF 08/535,681 09/28/1995 PAT 6,184,200

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 12/01/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

US Patent Operations DRC

Dept. 4300/MS 27-4-A

AMGEN INC.

One Amgen Center Drive

Thousand Oaks, CA 91320-1799

TITLE

Truncated glial cell line-derived neurotrophic factor

FILING FEE RECEIVED 980	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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